



ALLIANCE FOR UNIFORM HAZMAT TRANSPORTATION PROCEDURES  
Application and Instruction Packet  
For  
The Uniform State Hazardous Materials Transportation  
Motor Carrier Registration and Permit Program

**This packet includes Parts I & IV for the Annual Registration Renewal  
SHORT FORM – Required Annually**

The uniform registration and permitting application shall be completed by all motor carriers who:

Transport:

- 1) hazardous materials of a type and amount that require the transport vehicle to be placarded pursuant to 49 CFR, Part 172.500 et seq.; OR
- 2) hazardous waste of a type and amount that requires the shipment to be accompanied by a Uniform Hazardous Waste Manifest contained in 40 CFR, Part 262, including “state” designated hazardous wastes”. State designated hazardous wastes are additional hazardous wastes that have been officially determined by states that have been authorized by the United States Environmental Protection Agency to manage RCRA programs within their respective states. OR
- 3) low-level radioactive waste regulated by the Nuclear Regulatory Commission under 10 CFR, Parts 20 and 61.

And who operate in the following jurisdictions that participate in the uniform registration and permit program.

Illinois, Michigan, Oklahoma - Hazardous Waste Only  
West Virginia - All Hazardous Materials  
Minnesota, Ohio - All Hazardous Materials, Part III for Hazardous Waste  
Nevada - All Hazardous Materials, Part III for Radioactive Materials

Note: Transportation of wastes not covered under the Uniform State Hazardous Materials Transportation Motor Carrier Registration and Permit Program may have additional permit/registration/manifest requirements in various Program States. Questions should be directed to the specific Program State regarding the waste transportation as noted below:

Illinois: Non-hazardous special waste, potential infectious medical waste, used tires  
Michigan: Non-hazardous liquid industrial waste, scrap tires, PCB

Please refer to the instructions that accompany this application before contacting the base state with questions or requests for additional information.



# Alliance for Uniform HazMat Transportation Procedures Application and Instruction Packet

☐ Annual Registration Renewal

## PART I – Required for all Applicants

## Section A: Motor Carrier Information

1. Legal Name			2. Doing Business Name (DBA)		
3. Mailing Address			4. Physical Street Address		
5. City	6. State/Province	7. Zip Code	8. City	9. State/Province	10. Zip Code
11. Principal Business Phone Number		12. Principal Contact Cellular Phone		13. Principal Business Fax Number	
14. 24 Hr. Emergency Response Number		15. IRS Tax ID Number		16. PHMSA HazMat Registration Number	
17. USDOT#		18. MC or MX #		19. U.S. EPA ID# (Required for Hazardous Waste)	
20. Application Contact Person			21. Email address		

## Section B: Motor Carrier Operation

22. Carrier Operation (Check all that apply) A. <input type="checkbox"/> Interstate      B. <input type="checkbox"/> Intrastate C. <input type="checkbox"/> For-Hire      D. <input type="checkbox"/> Private		23. Do you transport hazardous waste in a manner that requires a uniform manifest? <input type="checkbox"/> Yes <input type="checkbox"/> No 24. Do you anticipate transportation of radioactive waste in Nevada? <input type="checkbox"/> Yes <input type="checkbox"/> No
25. Do you anticipate transportation of hazardous waste in the following states? <input type="checkbox"/> Illinois <input type="checkbox"/> Michigan <input type="checkbox"/> Minnesota <input type="checkbox"/> Nevada <input type="checkbox"/> Oklahoma <input type="checkbox"/> Ohio <input type="checkbox"/> West Virginia		26. Did you transport hazardous waste in any of the following states in the previous 12 months? <input type="checkbox"/> Illinois <input type="checkbox"/> Michigan <input type="checkbox"/> Minnesota <input type="checkbox"/> Nevada <input type="checkbox"/> Oklahoma <input type="checkbox"/> Ohio <input type="checkbox"/> West Virginia

## Section C: Fleet Information

Provide the following information for the applicant's fleet. If the applicant maintains multiple fleets for purposes of IRP reporting, complete a separate copy of this page (Section C) for each fleet. IRP covers only 26,000 pound and heavier vehicles. Therefore, also include non-IRP (and non-IFTA) power units as a separate fleet(s) if necessary.

27. IRP/IFTA Account Number	28. Reporting Period (12 months) <input type="checkbox"/> Calendar Yr _____ <input type="checkbox"/> Other - from _____ to _____
29. Average number of power units owned, leased or operated for the time period indicated in Item 28.	30. Average number of cargo tanks owned, leased or operated for the time period indicated in Item 28. Above 3500 water gallons _____ Capacities at or below 3500 water gallons _____

31. International Registration Plan (IRP) Percentages – Fleet # \_\_\_\_\_

AL _____%	FL _____%	KY _____%	MO _____%	NJ _____%	RI _____%	VA _____%
AK _____%	GA _____%	LA _____%	MT _____%	NM _____%	SC _____%	WA _____%
AZ _____%	HI _____%	MA _____%	NC _____%	NY _____%	SD _____%	WV _____%
AR _____%	ID _____%	MD _____%	ND _____%	OH _____%	TN _____%	WI _____%
CA _____%	IL _____%	ME _____%	NE _____%	OK _____%	TX _____%	WY _____%
CO _____%	IN _____%	MI _____%	NV _____%	OR _____%	UT _____%	DC _____%
CT _____%	IA _____%	MN _____%	NH _____%	PA _____%	VT _____%	Other North American _____%
DE _____%	KS _____%	MS _____%				

32. Percentage of transportation activity that involves hazardous materials

<input type="checkbox"/> None- MIDPOINT 0.0%	<input type="checkbox"/> 30.1 to 40.0 – MIDPOINT 35.0%	<input type="checkbox"/> 70.1 to 80.0 – MIDPOINT 75.0%
<input type="checkbox"/> Greater than 0 to 10.0 – MIDPOINT 5.0%	<input type="checkbox"/> 40.1 to 50.0 – MIDPOINT 45.0%	<input type="checkbox"/> 80.1 to 90.0 – MIDPOINT 85.0%
<input type="checkbox"/> 10.1 to 20.0 – MIDPOINT 15.0%	<input type="checkbox"/> 50.1 to 60.0 – MIDPOINT 55.0%	<input type="checkbox"/> 90.1 to 100.0 – MIDPOINT 95.0%
<input type="checkbox"/> 20.1 to 30.0 – MIDPOINT 25.0%	<input type="checkbox"/> 60.1 to 70.0 – MIDPOINT 65.0%	

33. Percentage of transportation activity attributed to only hazardous waste for the twelve month period indicated in Item 28 \_\_\_\_\_

34. Check each applicable class, division and zone of hazardous materials transported. (See 49 CFR 173.2 et.seq)

- |  |   |
|--|---|
| <input type="checkbox"/> Div 1.1 Explosives (with mass explosion hazard)                       | <input type="checkbox"/> Div 4.2 Spontaneously Combustible material                       |
| <input type="checkbox"/> Div 1.2 Explosives (with projection hazard)                           | <input type="checkbox"/> Div 4.3 Dangerous when wet material                              |
| <input type="checkbox"/> Div 1.3 Explosives (with predominantly fire hazard)                   | <input type="checkbox"/> Div 5.1 Oxidizer   |
| <input type="checkbox"/> Div 1.4 Explosives (with no significant blast hazard)                 | <input type="checkbox"/> Div 5.2 Organic Peroxide   |
| <input type="checkbox"/> Div 1.5 Very insensitive explosives; blasting agents                  | <input type="checkbox"/> Div 6.2 Infectious substance (Etiologic agent)                   |
| <input type="checkbox"/> Div 1.6 Extremely insensitive detonating substances                   | <input type="checkbox"/> Div 6.1 A (Poison Liquid which is a PIH Zone A)                  |
| <input type="checkbox"/> Div 2.1 Flammable gas   | <input type="checkbox"/> Div 6.1 B (Poison Liquid which is a PIH Zone B)                  |
| <input type="checkbox"/> Div 2.1 LPG (Liquified Petroleum Gas)                                 | <input type="checkbox"/> Div 6.1 Poison (Poisonous liquid with no inhalation hazard)      |
| <input type="checkbox"/> Div 2.1 Methane Gas   | <input type="checkbox"/> Div 6.1 Solid (Meets the definition of a poisonous solid)        |
| <input type="checkbox"/> Div 2.2 Non-flammable compressed gas                                  | <input type="checkbox"/> Class 7 Radioactive materials                                    |
| <input type="checkbox"/> Div 2.2 A (Anhydrous Ammonia)   | <input type="checkbox"/> HRCQ (Highway Route Controlled Quantity of Radioactive Material) |
| <input type="checkbox"/> Div 2.3 A (Poison Gas which is Poison Inhalation Hazard (PIH) Zone A) | <input type="checkbox"/> Class 8 Corrosive material                                       |
| <input type="checkbox"/> Div 2.3 B (Poison Gas which is PIH Zone B)                            | <input type="checkbox"/> Class 8 A (Corrosive liquid which is a PIH Zone A)               |
| <input type="checkbox"/> Div 2.3 C (Poison Gas which is PIH Zone C)                            | <input type="checkbox"/> Class 8 B (Corrosive liquid which is a PIH Zone B)               |
| <input type="checkbox"/> Div 2.3 D (Poison Gas which is PIH Zone D)                            | <input type="checkbox"/> Class 9 Miscellaneous hazardous material                         |
| <input type="checkbox"/> Class 3 Flammable and combustible liquid                              | <input type="checkbox"/> Elevated Temperature Material Infectious Waste                   |
| <input type="checkbox"/> Class 3 A (Flammable liquid which is a PIH Zone A)                    | <input type="checkbox"/> Marine Pollutants  |
| <input type="checkbox"/> Class 3 B (Flammable liquid which is a PIH Zone B)                    | <input type="checkbox"/> Hazardous Sub (RQ)   |
| <input type="checkbox"/> Combustible Liquid (Refer to 49 CFR 173.120 (b))                      | <input type="checkbox"/> Hazardous Waste  |
| <input type="checkbox"/> Div 4.1 Flammable Solid   | <input type="checkbox"/> ORM  |

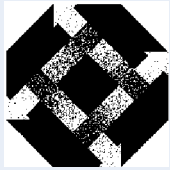
35. Which of the following hazardous material(s) does your company transport, check all that apply:

- |  |  |
|--|--|
| <input type="checkbox"/> 1. Highway Route Controlled Quantities (HRCQ of Radioactive materials)  | <input type="checkbox"/> 3. (cont'd) material in a bulk package (capacity greater than 450 liters (119 gallons), a material meeting the definition of a Hazard Zone C or D (TIH) material in a bulk packaging that has a capacity greater than 13,248 L (3,500 gallons). |
| <input type="checkbox"/> 2. More than 25 kg (55 pounds) of a Division 1.1, 1.2, or 1.3 material or a quantity of Division 1.5 material that requires placarding  | <input type="checkbox"/> 4. Shipments of compressed or refrigerated liquid methane or liquefied natural gas with a methane content of at least 85% in a bulk packaging that has a capacity greater than 13,248 L (3,500 gallons)   |
| <input type="checkbox"/> 3. For materials that meet the definition of "material poisonous by inhalation (TIH) as defined in 49 CFR 171.8: More than 1 liter (1.08 quarts) per package of a material meeting the definition of a Hazard Zone A (TIH) material, a material meeting the definition of a Hazard Zone B (TIH) (cont'd in next column) |  |

35a. If you checked any of the boxes in Item 35, you **must certify the following four statements** with your initials in the line to the left of each statement.

- |       |  |
|-------|--|
| _____ | 1. I certify that the applicant has been issued a Satisfactory Safety Rating from the Federal Motor Carrier Safety Administration.                                     |
| _____ | 2. I certify that the applicant's out of service rate is not in the top 30% of the national average.   |
| _____ | 3. I certify that the applicant's crash rate is not in the top 30% of the national average.  |
| _____ | 4. I certify that, to the best of my knowledge, the applicant has a system to adequately communicate and/or track shipments of hazardous materials per 49 CFR 385.415. |

Part IV – Required for all Applicants	General Application Certifications
<input type="checkbox"/> I certify that the applicant's hazardous materials transportation (including hazardous waste) license, permit, or registration has not been withdrawn, denied, suspended or revoked by any state, local, or federal agency in the past year.	
<input type="checkbox"/> I certify that the applicant's USDOT safety rating has not changed in the past year.	
<input type="checkbox"/> I certify that the applicant has had no changes in majority ownership or convictions against the applicant or the applicant's key management personnel for any crime covered under Part III, Section F, Legal Proceedings in the past year.	
<input type="checkbox"/> I certify that the applicant has a properly executed Form MCS-82 or MCS-90 and has in effect and will maintain the minimum level of financial responsibility as required by 49 CFR, Part 387 or required coverage for intrastate carriers, if applicable.	
<input type="checkbox"/> I certify that there have been no changes in the applicant's operations that would require the applicant to obtain a higher level of credential under the Uniform Program. (Example: A carrier with a Part II Hazardous Materials permit begins transporting hazardous waste in a state that requires the Part III disclosure.)	
<input type="checkbox"/> I understand that any information contained in this application may be verified through either a desk audit or on-site audit.	
<input type="checkbox"/> I certify that, to the best of my knowledge and after due investigation, the information contained in this application is true, accurate, and complete.	
_____ Name (please type or print)	_____ Title
_____ Signature – Must be signed by owner or officer of the company	_____ Date
<p>False statements may violate 18 U.S.C. 1001, may incur state penalties, and may invalidate the registration and permit form.</p> <p style="text-align: center;"><b>This page MUST be signed in INK and returned with the application</b></p>	



Revised 07/06

## Alliance for Uniform HazMat Transportation Procedures Annual Registration Renewal Fee Worksheet Summary Form

If applicant maintains multiple fleets for purposes of IRP reporting, complete a separate copy of this page for each fleet. IRP covers only 26,000 pound and heavier vehicles. Therefore, also include a non-IRP and non-IFTA power units as a separate fleet(s) if necessary.

Fleet # \_\_\_\_\_

**Please read instructions 1-8 on this page before filling out the calculation spreadsheet**

General Processing Fee Item 1	Power Units Item 2	x	% IRP Mileage Item 3	x	% HazMat Activity Item 4	or	% HazWaste Activity Item 5	=	Round up to whole # Item 6	x	Vehicle Fee Item 7	=	Total per State Fees Item 8
1. IL \$250.00		x		x	N/A	or		=		x	\$20.00	=	
2. MI \$50.00		x		x	N/A	or		=		x	\$50.00	=	
3. OK \$50.00		x		x	N/A	or		=		x	\$100.00	=	
4. MN \$50.00		x		x		or		=		x	\$30.00	=	
5. NV \$125.00		x		x		or		=		x	\$125.00	=	
6. OH \$50.00		x		x		or		=		x	\$20.00	=	
7. WV \$50.00		x		x		or		=		x	\$50.00	=	
Add Lines 1-7													
Add Base State Processing Fee (Item 1)													
Total Remittance													

Item 1 General Processing Fee - Pay this fee only to the Base Jurisdiction

Item 2 Enter average number of power units owned, leased or operated for the time period indicated in Section C, item 28 on page 1

Item 3 Enter IRP mileage percentages from Section C, item 31 on page 1. All percentages should be rounded to two decimal places and the sum of these percentages must equal 100 percent. Intrastate carriers should allocate 100 percent to the state in which they operate.

Item 4 Enter HazMat activity percentage from Section C, item 32 on page 1. **This percentage represents total activity in all states combined. Do not split activity among states.** The percentage of hazardous materials activity for less-than-truckload shipments shall be the weight of all hazardous materials shipments divided by the total weight of all shipments for either the last calendar year or the applicant's fiscal year. For truckload shipments, the percentage of hazardous materials activity shall be the number of placarded or marked shipments divided by the total number of shipments for the most recent twelve-month period for which this information is available. A carrier that transports both less-than-truckload and truckload shipments of hazardous materials shall calculate the percentage of hazardous materials activity on a proportional basis.

Item 5 Enter the total percentage attributed ONLY to hazardous waste activity from Section C, item 33 on page 1 for the states of Illinois, Michigan and Oklahoma. **This percentage represents total activity in all states combined. Do not split activity among states.**

Item 6 Enter the result of multiplying number of vehicles X IRP% X HM (or) HW % and round up to the nearest whole number.

Item 7 Vehicle Registration Fee - Pay this fee per vehicle after calculating mileage and activity.

Item 8 Enter the result of multiplying the whole number in Item 7 X per vehicle registration fee in Item 8 above.

Note: A separate invoice for the Part III Review fee will be sent directly to the Applicant from the Part III Review jurisdiction.

**STATE ADMINISTERING AGENCY****UNIFORM PROGRAM LEVEL**

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**Illinois**

Illinois Environmental Protection Agency  
Division of Land Pollution Control  
1021 North Grand Avenue East  
Springfield, IL 62702

Phone: 217/785-8604

FAX: 217/782-9290

Part II for Hazardous Waste

*Make checks payable to: TREASURER, STATE OF ILLINOIS*

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**Michigan**

Michigan Department of Environmental Quality  
P.O. Box 30657  
Lansing, MI 48909

Phone: 586/753-3850

FAX: 586/753-3831

Part II for Hazardous Waste

*Make checks payable to: STATE OF MICHIGAN*

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**Minnesota**

Minnesota Department of Transportation  
395 John Ireland Boulevard MS 420  
St. Paul, MN 55155-1899

Phone: 651/215-6311

FAX: 651/215-9684

Part II for Hazardous Materials

Part III for Hazardous Waste

*Make checks payable to: COMMISSIONER OF TRANSPORTATION*

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**Nevada**

Nevada Highway Patrol  
HazMat Registration & Permit Section  
555 Wright Way  
Carson City, NV 89711-0525

Phone: 775/684-4622

FAX: 775/684-4649

Part II for Hazardous Materials/Waste

Part III for Radioactive Waste

*Make checks payable to: NEVADA HIGHWAY PATROL*

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**Ohio**

Public Utilities Commission of Ohio  
Motor Carrier Registration, 14<sup>th</sup> Floor  
180 East Broad Street  
Columbus, OH 43215-3793

Phone: 614/466-3392

FAX: 614/728-9292

Part II for Hazardous Materials

Part III for Hazardous Waste

*Make checks payable to: TREASURER, STATE OF OHIO*

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**Oklahoma**

Oklahoma Corporation Commission  
Transportation Division  
P.O. Box 52000  
2101 North Lincoln Blvd.  
Oklahoma City, OK 73152-2000

Phone: 405/521-2915

FAX: 405/521-2916

Part II for Hazardous Waste

*Make checks payable to: OKLAHOMA CORPORATION COMMISSION*

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**West Virginia**

Public Service Commission of West Virginia  
Motor Carrier Section  
201 Brooks Street  
Post Office Box 812  
Charleston, WV 25323

Phone: 304/340-0456

FAX: 304/340-0394

Part II for All Materials/Waste

*Make checks payable to: PUBLIC SERVICE COMMISSION OF WEST VIRGINIA*

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